

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA		07-17-01
ON.P.E. CLASSIFIER		48	7/30/01
FORMALITY REVIEW	DA	G. C. Hall	08/25/01
RESPONSE FORMALITY REVIEW	JF	1027	11-14-02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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373  
 12/1/11  
 5/2/15